

A HEALTHIER YOU™

2002 LEGACY AWARDS

We congratulate you on bringing health to the forefront in your community by becoming a partner in *A Healthier You – Healthy Community Awards*. The leadership you are demonstrating is exemplary. The policies and programs you will develop through this initiative will have a positive, long-term impact on your community and citizens.

A Healthier You Community Resource Manual was developed collaboratively by the Utah Department of Health, University of Utah Health Sciences Center, Utah Division of Substance Abuse and Mental Health, and community Partners. An expert from each of these organizations/agencies have outlined specific steps and policies information about potential community projects and provides you with resources to achieve the goals you define. These experts are also available to assist you with the process you develop.

We look forward to visiting your community soon, and wish you luck in this important undertaking,

Sincerely,

Scott D. Williams, MD

*Executive Director
Utah Department of Health*



Kim Wirthlin

*Assistant Vice President for
Health Sciences
Legislative and Public Affairs
University of Utah*



Randall Bachman

*Director
Division of Substance
Abuse and Mental Health*

A HEALTHIER YOU™

2002 LEGACY AWARDS

Healthy Community Awards Application

Instructions Checklist:

- ☐ Review the Healthy Community Awards Criteria (brochure) which outlines the requirements to obtain the award.
- ☐ Check the boxes next to the items you have completed from the Healthy Community Award Criteria.
- ☐ Return (1) Application Form and (2) Healthy Community Award Criteria Form.
- ☐ Return all forms (Application Form and Healthy Community Award Criteria Form with a **\$35** processing fee to: Healthy Community Awards Initiative; c/o Connie Kitchens; Department of Human Services; 120 N. 200 W. – room 209; SLC, UT 84103).

Application Timeframe:

Contact Connie Kitchens (801) 538-8291 or ckitchens@utah.gov if you have any questions or desire assistance in completing the application or determining how current activities fit into the Healthy Community Award Requirements.

City/Town: _____ Population _____

Total Number of City Employees _____

Healthy Community Project Director _____

Address _____

Phone Number _____ Email _____

FAX _____

I confirm the all information supplied on this application for the Healthy Community Award is true and accurate, to the best of my knowledge. I understand that a visit may be made to my community to review the scope of our efforts. My community has on file documentation for the claims made on this application.

Signature: _____ Date: _____

Additional Signatures: _____

Chief Executive (Mayor, city manager, etc)

Signature: _____ Date: _____

Printed name of signer: _____

Title: _____

Which **level** are you applying for?

☐ **Gold Plus** ☐ **Gold** ☐ **Silver** ☐ **Bronze**

A HEALTHIER YOU™

2002 LEGACY AWARDS

Healthy Community Awards Application

Policy: (attach copy of policy)

	Section (safety, nutrition, physical activity, preventive services, healthy behaviors)	Policy
1.		
2.		
3.		

Infrastructure

	Section (safety, nutrition, physical activity, preventive services, healthy behaviors)	Description
1.		
2.		
3.		

Outcomes - (attach survey instruments, graphs, data)

	Section (safety, nutrition, physical activity, preventive services, healthy behaviors)	Description
1.		
2.		
3.		

A HEALTHIER YOU™

2002 LEGACY AWARDS

Healthy Community Awards Application

Promotion: (check all methods of promotion used)

- | | |
|-------------------------------------|--|
| <input type="checkbox"/> Flyers | <input type="checkbox"/> Bulletin Boards |
| <input type="checkbox"/> Posters | <input type="checkbox"/> Word of Mouth |
| <input type="checkbox"/> Newsletter | <input type="checkbox"/> Intranet site |
| <input type="checkbox"/> E-mail | <input type="checkbox"/> Bill Stuffers |
| <input type="checkbox"/> Phone | <input type="checkbox"/> Display Case |
| <input type="checkbox"/> Displays | <input type="checkbox"/> Other: _____ |

Program Description & Procedures

Detailed program components including incentives. Describe program steps so future staff can easily understand and replicate. May attach additional sheets.

Timeline:

A HEALTHIER YOU™

2002 LEGACY AWARDS

Healthy Community Awards Application

Participation

# of Participants	% of Community Participating

Program Highlights & Possible Modifications: *(future changes, program successes, etc.)*

Participant Comments: *(based on participant feedback what changes would you make)*

Staff Evaluation: *(at the completion of the program what changes would you make)*

1. Was there anything that should have been included or deleted from the program?

2. Was the program difficult enough?

3. Was your marketing strategy effective?

4. Would you do this program again?

TableOfContents◀

Introduction Letter

Healthy Communities Awards Application.....	iii-vi.
--	----------------

Section 1: General Community

Overview	1
Policy/Infrastructure/Outcomes	1
Map of Utah Health Districts	1
Utah Local Association of Community Health Education Specialists (ULACHES) List	2
Utah Recreation and Parks Association Agencies	3
Healthy Worksite Award participants	4
Healthy School Award participants	5-7
Resources	7
National Health Observances—The Year 2003 At a Glance	8-11
Focus Groups	12-15
Creating Policy	15-16
Behavioral Risk Factor Surveillance System (BRFSS)	16-17
Sample Budget Sheet	18

Section 2: Physical activity

Overview	1
Policy/Infrastructure/Outcomes	1
Potential Activities	1
Gold Medal Mile Sites	2
Resources	3
Web sites	3
Funding Sources	4
Assessment Models	5-14
Community Audits and Assessments	4
Pedestrian Audit	5
Bicycle Audit	5
Statewide Telephone Survey	6
Active Community Environment	7-10
Survey of Transportation to and from School	11-12
Walk to School Day Walkability Checklist	13-14

Section 3: Preventive Services

Overview	1
Policy/Infrastructure/Outcomes	1
Oral Health	1-3
Activities	1
Coalitions	1
Utah Dental Safety-Net Clinics	2
Web sites	3
Immunizations	4-12
Overview	4
Activities	4
Care-A-Van	4
Coalitions	4
Web sites	5
Vaccines for Children	6-7
Immunization Schedule for Children	8-9
Adult Vaccine Schedule	10-11
preventive Health Guidelines	12

► TableOfContents

Section 4: Nutrition

Overview	1
Policy/Infrastructure/Outcomes	1
Potential Activities	1
Coalitions/Contacts	1
Web sites	2
Farmers Markets	2-4
Utah Farmers Markets	3
Farmers Markets Web sites	4
Community Gardens	4
Contacts	4
Web sites	4
Vending Machines	5
Breastfeeding	6
Coalitions	7
Web sites	7

Section 5: Healthy Behaviors

Overview	1
Policy/Infrastructure/Outcome	1
Events/Ideas	1
Tobacco	2-12
Resources	2
Coalitions	2
Web sites	2
Utah Quit Line facts	3
QuitNet	4-5
Tobacco Facts - Utah	6
Tobacco Facts - United States	7
Tobacco & Substance Abuse Policies (Sample)	8-12
Substance Abuse	13
Resources	13
Drug-Free Grantees	13
Prevention Coordinators List	14
Best Practice Links	15
Web sites	15
Substance Abuse Prevention in Utah	16-17
Prevention Dimensions	18

Section 6: Safe Behaviors

Overview	1
Policy/Infrastructure/Outcomes	1
Safety Events	1
Bike Lanes	1
Helmets	2
Speeding	2
Sidewalks	2
Child Safety Seats	2
Safety Coalitions	3
Rape and Sexual Assault	4
Domestic Violence	4
Utah Domestic Violence Coalitions	5
Utah Rape Crisis Programs	6
Utah Domestic Violence Shelter Directory	7
Web Sites	8